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FEC FORM 2 STATEMENT OF CANDIDACY

TATEMENT OF CAND			174 W V A=	
I. (a) Name of Candidate (in full)			09 JUL -9 DH	
Barbara Boxer			2. Identification Number 3: 15	
(b) Address (number and street)		Check if address changed	2. Identification Number 3: 15	
PO Box 411176			S2CA00286	
(c) City, State and ZIP Code			3. Is This New Statement New (A)	
Los Angeles	CA	90041	(N) OR — (A)	
. Party Affiliation	5. Office Sought		istrict of Candidate	
DEMOCRATIC PARTY	Senate	CA 0	U	
DE	SIGNATION OF PI	RINCIPAL CAMPAIGN	N COMMITTEE	
I hereby designate the following name	d political committee as my	Principal Campaign Committee	e for the 2010 election(s). (year of election)	
NOTE: This designation should be	e filed with the appropriat	te office listed in the instructi	ions.	
(a) Name of Committee (in full)				
Friends of Barbara Boxer				
(b) Address (number and street)				
PO Box 411176	•			
(c) City, State and ZIP Code				
Los Angeles	CA	90041		
			COMMITTEES	
DE	SIGNATION OF O	THER AUTHORIZED (Joint Fundraising Represent	tatives)	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund	SIGNATION OF O' (Including	THER AUTHORIZED (Joint Fundraising Represent my principal campaign commit		
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street)	SIGNATION OF O' (Including	THER AUTHORIZED (Joint Fundraising Represent my principal campaign commit	tatives)	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE	SIGNATION OF O' (Including	THER AUTHORIZED (Joint Fundraising Represent my principal campaign commit	tatives)	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code	(Including dominitee, which is NOT	THER AUTHORIZED (Joint Fundraising Represent my principal campaign committee)	tatives)	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee. campaign committee.	tatives) tee, to receive and expend funds on behalf of my	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee. campaign committee.	tatives)	
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I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington I certify that I have ex	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee. campaign committee.	tatives) tee, to receive and expend funds on behalf of my edge and belief it is true, correct, and complete.	
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I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington I certify that I have existence of Candida(6) Barbara Boxer	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of the p	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee campaign committee. 20002 and to the best of my knowle	tatives) tee, to receive and expend funds on behalf of my edge and belief it is true, correct, and complete. $\frac{1}{7/6/2009}$	
I hereby authorize the following named candidacy. NOTE:This designation should be (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington I certify that I have existing a control of Candida(a) Barbara Boxer	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of the p	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee campaign committee. 20002 and to the best of my knowle	tatives) tee, to receive and expend funds on behalf of my edge and belief it is true, correct, and complete.	
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Barbara Boxer NOTE: This designation should be candidacy. (a) Name of Committee (in full) Boxer Victory Fund (b) Address (number and street) 120 Maryland Avenue NE (c) City, State and ZIP Code Washington	ESIGNATION OF O' (Including of committee, which is NOT) a filed with the principal of the p	THER AUTHORIZED Joint Fundraising Represent my principal campaign committee campaign committee. 20002 and to the best of my knowle	tatives) tee, to receive and expend funds on behalf of my edge and belief it is true, correct, and complete. $\frac{1}{7/6/2009}$	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

• • • • • • • • • • • • • • • • • • • •	committee, which is NOT my principal ca	ampaign committee, to receive and expend fu	inds on behalf of my
candidacy.			•
NOTE:This designation should	be filed with the principal campaign co	ommittee.	
(a) Name of Committee (in full			
Boxer CDP 2010			
(b) Address (number and stree	t)		
1401 21st Street #200			
(c) City, State and ZiP Code			
Sacramento, CA	95811		
	DESIGNATION OF OTHER AL	JTHORIZED COMMITTEES	[ADDITIONAL]
	(Including Joint Fundr	aising Representatives)	,
I hereby authorize the following name candidacy.	d committee, which is NOT my principal ca	ampaign committee, to receive and expend fu	inds on behalf of my
·	be filed with the principal campaign co	ommittee.	
(a) Name of Committee (in full	J		
Boxer-Franken 2009			
(b) Address (number and stree	t)		
777 S. Figueroa Street, Ste	. 4050		
(c) City, State and ZIP Code			
Los Angeles	90017		

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